

CLAIMS ONLY

Application Number

Application Number
10-823298

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
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43			/			
44			/			
45			/			
46			/			
47			/			
48			/			
49			/			
50			/			
Total Indep			2			
Total Depend			19			
Total Claims			21			